

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			3/5
I.P.E. CLASSIFIER	(S)	57	3-11-99
FINALITY REVIEW		10008	3/5-99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Original	Date
1	✓	3/5
2	✓	3/5
3	✓	3/5
4	✓	3/5
5	✓	3/5
6	✓	3/5
7	✓	3/5
8	✓	3/5
9	✓	3/5
10	✓	3/5
11	✓	3/5
12	✓	3/5
13	✓	3/5
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49	✓	3/5
50	✓	3/5

Claim	Original	Date
51	✓	3/5
52	✓	3/5
53	✓	3/5
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99	✓	3/5
100	✓	3/5

Claim	Original	Date
101	✓	3/5
102	✓	3/5
103	✓	3/5
104	✓	3/5
105	✓	3/5
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108	✓	3/5
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142	✓	3/5
143	✓	3/5
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146	✓	3/5
147	✓	3/5
148	✓	3/5
149	✓	3/5
150	✓	3/5

If more than 150 claims or 10 actions
 staple additional sheet here

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